Martinez, Jr.

2. Fiscal Year Covered From:

1- / 1. / 0.4 | Through: 12 / 31 / 05

Name PAINTERS LOCAL UNION NO. 53

4. Name, file number, and address of labor organization,

Labor Organization File Number 036 128

U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2003

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



3. Name and address of person filing.

1, File Number U -

Name

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

The state of the s	P.O. Box, Building and Room Number, if any		
Street 7940 Northaven Rd., Ste.4.	Street 7040 Northaven Rd., Ste. 4		
Chy Dallas	City Dall Las		
State Texas ZIP Code +4 75230	State Texas ZIP Code +4 75230		
5. Position in labor organization. Vn Lon Trustee			
Enter appropriate data below if, during the past fizcal year, you or your spo (except as specified in the exch	use or minor child directly or indirectly had any of the following interests islons set forth in the instructions):		
A. Held an Interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetery value from an employer whose employees your organization represents or is actively seaking to represent.			
monelary value from an employer whose employees your organizati	on represents or is actively seaking to represent.		
monetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any).	on represents or is actively seaking to represent. 7.a. Nature of Interest, Transaction, or Income.		
The state of the s	on represents or is actively seaking to represent.		
Name and address of Employer (including trade name, if any).	on represents or is actively seaking to represent.		
Name and address of Employer (including trade name, if any). Name	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including Irade name, if any). Name Trade Name, if any:	on represents or is actively seaking to represent.		
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.		

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Date

(214) = 363 - 6246

Telephone Number

Name of Person Filing	F	ile Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employers your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
6. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name	ļ.,		
Trade Name, If any:	a. Labor Organization X b. Trust		
P.O. Box, Bidg., Room No., if any	X b. Trust		
Street [Carrie of Chiphoyer		
dy			
State ZIP Code + 4		,	
10. If 9.b. or 9.c. is checked give trust or employer's патта.	11.a. Nature of such dealing.	Marikana dan salasan kana dan salasan	
Name Painters Local Uniton No. 53	2004 Travel	Expenses co arread	
Trade Name, if any:	rustees me		
P.O. Box, Bldg., Room No., If any		etiles:	
Street 7920 Northaven Rd., 1962 37	11.b. Approximate dollar value o	who are the second seco	
City Dallas	12 a Nature of interest hold o	I because we asked	
State Texas ZIP Code + 4 75 23 0	Reinblicsed	The second of th	
	de la manufactura de la composición del composición de la composición de la composición de la composición del composición de la composició	The control of the co	
	The second secon	English and which the property of the property	
	12.b. Amount.		
C Received from any employer (other than an employer colored undo	and A and D all and	(Schalaber 23 2009)) a (Perinada Circumsta)	
C. Received from any employer (other than an employer covered under parts A and B above) The provided from any employer (other than an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (Including trade name, if any).	14.a. Nature of payment.		
Name	The state of the s		
Trade Name, If any:	The state of the s		
P.O. Box, Bldg., Room No., if any		A SAN THE PROPERTY OF THE PROP	
Street Street	the first transfer of the second of the seco	And the second s	
City City Control of the Control of	The state of the s	Commence of the commence of th	
State ZIP Code + 4	End Table Transfer Comments	The state of the s	
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.		